## (DRAFT/UNAPPROVED)

## VIRGINIA BOARD OF PHARMACY MINUTES OF INFORMAL CONFERENCE COMMITTEE

October 20, 2009
Second Floor
Training Room 2
Department of Health Professions
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233

CALL TO ORDER: A meeting of an informal conference committee of the Board of

Pharmacy was called to order at 1:35 pm.

PRESIDING: David C. Kozera, Committee Chairman

MEMBERS PRESENT: John O. Beckner

STAFF PRESENT: Elizabeth Scott Russell, Executive Director

Caroline D. Juran, Deputy Executive Director

Boydton Community Pharmacy Telepharmacy,

**Applicant** 

Fleet W. Richards, Jr., pharmacist in charge of F.W. Richards, Jr., Inc.; Robert P. Chadeayne, Treasurer of Health Care on the Square; Richard Melke, Executive Director of Boydton Community.

Richard Melke, Executive Director of Boydton Community Health; Charles Kallmeyer, Sales Manager Retail Southeast Market for ScriptPro; and Russell S. Wheeler, Vice President Business Development for ScriptPro, were present to discuss the

application, received August 31, 2009, for approval of an Innovative (Pilot) program in which the Board would issue a pharmacy permit to Boydton Community Pharmacy, a currently unoccupied space which previously held a pharmacy permit, in which there would be no pharmacist on premises, a pharmacy technician would be present during hours of business to fill prescriptions, and pharmacist supervision and checking of the prescriptions would be provided via remote camera and technology by the pharmacist at F.W. Richards, Jr., Inc., pharmacy permit

0201-001375, Chase City, VA.

Discussion: Representatives of ScriptPro presented information about the

available technology to enable telepharmacy and its use in other states. Statements made by the applicant indicated that this pharmacy would not be using the entire technology package to include the automated packaging and labeling machine. The actual drug selection, packaging and labeling would be done manually by the pharmacy technician and just checked by the remote

pharmacist via camera and review of a shared dispensing database,

and a scanned image of the prescription.

Mr. Richards and the representatives of Boydton Medical Center responded to questions of the committee. Mr. Richards stated that he wished to stock drugs in Schedules II-VI in the space formerly occupied by Boydton Community Pharmacy with only two

pharmacy technicians present, and that it could be possible that only one pharmacy technician may be present with the entire drug stock should the other pharmacy technician not be able to work a particular day. He stated that he anticipated visiting the Boydton site approximately one day a week. He admitted that the supervision of the Boydton site would be in addition to his pharmacist responsibilities at the Chase City pharmacy, and that he would not be solely focused on the Boydton location.

There was discussion of other pharmacy services in the area and it was established that there were several pharmacies within approximately 10 miles of Boydton. The representatives of the Boydton Community Health Clinic stated that many of their clientele were older and had no good means of transportation to a pharmacy 10 miles away, when they may have had difficulty even getting to the clinic, relying on having to pay a friend or family member to bring them to the clinic. They considered that a pharmacy in the clinic would be more convenient for these patients and would improve compliance. Currently Community Memorial Healthcenter Pharmacy is handling the clinic's 340B medications for patients via alternate delivery back to the clinic from South Hill, but that the clinic does not receive any remuneration by having the prescriptions filled in this manner. They also stated that they had not explored alternate delivery by any other pharmacy. Upon questioning, they stated that many of the clinic's patients did not reside in Boydton, but actually came from other communities in three counties, and admitted that these patients would possibly pass by a pharmacy on their way to or from the clinic.

The Committee then requested that Mr. Richards and the representatives return to the waiting room so they could discuss the matter. After the discussion, Mr. Richards and the representatives returned.

After consideration of the application and statements concerning the proposed Innovative (Pilot) program, Mr. Kozera moved, and the Committee voted 2-0 in favor of the motion, that the application for approval of an Innovative (Pilot) program authorizing the use of telepharmacy in Boydton Community Pharmacy be denied based on the fact that the applicant failed to establish a basis for approval of the innovative program pursuant to § 54.1-3307.2.

Specifically, the Committee expressed concern for the security of the drug stock in only having a pharmacy technician on site. Additionally, the Board expressed concern for possible diversion and public safety. The pharmacy technician at Boydton

Decision:

Community Pharmacy would be expected to manually fill the dispensed prescriptions, since the drugs would not be pre-packed and verified by a pharmacist, and robotics would not be utilized in the filling process. Also, the pharmacist at F.W. Richards, Jr. Inc. providing the supervision would not be solely focused on supervising the remote location, i.e., as the sole pharmacist onduty, he would be multitasking by operating his own pharmacy and providing supervision to the remote location. A third concern stated by the Committee involves the fact that patients in this area of Virginia do not appear to lack pharmacy access. While other states that have allowed telepharmacy are experiencing pharmacist shortages that force patients to travel greater than 25 miles to the nearest pharmacy, patients using Boydton Community Health need only travel approximately 10 miles to the closest of multiple pharmacies. Also, many patients currently using Boydton Community Health live outside Boydton, VA and travel by a pharmacy to get to the clinic. Additionally, Virginia is not currently experiencing an acute shortage of pharmacists. Lastly, the Committee acknowledged that Boydton Community Health is already providing certain dispensed drugs to patients using an alternate delivery method with the local hospital and an expansion of this process has not yet been explored, nor has the possibility of licensing the physicians at Boydton Community Health to dispense prescription drugs to their own patients.

ADJOURN:	With all business concluded, the meeting adjourned at 3:05pm.
	Caroline D. Juran
	Deputy Executive Director
David C. Kozera	<del></del>
Chair	
Date	